

Diversity Restoration Solutions, Inc.
UNDERGROUND RAILROAD EXPERIENCE DAY TOUR

GROUP TOUR INTEREST FORM

(A 20% non-refundable deposit is required to secure tour date)

Group Name: _____

Contact: _____

Phone Number/Email: _____

Address: _____ City/State _____ Zip _____

Type of Group: Family Reunion___ Community Organization ___ School ___
Nonprofit ___ Religious Organization ___ Corporate ___ Other: (Please describe) _____

Requested Dates: 1st _____ 2nd _____ 3. _____
(Please list in order of preference)

of people in group: _____ Do you need a bus: Yes ___ No ___ (Min. required to book tour is 35)

Location pickup: _____

Do you want lunch included (group will pay separately) Yes _____ No _____

Handicap needs: Yes ___ No ___ If yes, please describe: _____
(All sites can accommodate wheelchair accessibility)

Need overnight accommodations: Yes _____ No _____

How did you hear about tour: _____

Comments/requests _____

If you have any questions, please contact Lisa Sheppard, Tour Director, at (757) 675-2062

Rev 2.21.17

Office use: Tour Date _____ Pick up time _____ P/P \$ _____ Deposit & Contract Received _____

Bus Company _____ # of bus(es): _____ Lunch location _____ Other: _____